Please type a plus sign (1) made the seri	ase type a plus sign (+) inside this box $\longrightarrow$ $+$
---	--

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

d valid down	Attorney Docket Number	NPX001US			
DECLARATION FOR UTILITY OR	First Named Inventor	Kia Silverbrook			
DESIGN PATENT APPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number				
•	Filing Date				
☑ Declaration  ☐ Declaration  ☐ Submitted OR  ☐ Submitted after Initial  ☐ Declaration  ☐ Declaration	Group Art Unit				
with Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name				

As a below named inver	tor, I hereb	y declare that:					
			s stated below next to my	namo.		1	
My residence, post office address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
COMPUTER SYSTEM CONTROL VIA INTERFACE SURFACE							
the specification of which (Title of the Invention)							
OR	_		<del> 1</del>	d Ctatan Anglicat	ion Number or PCT Int	ernational	
was filed on (MM/						pplicable).	
Application Number			s amended on (MM/DD/\				
I hereby state that I have amended by any amendm	reviewed an	d understand the dally referred to abo	ontents of the above ider ve.	itified specification	n, including the claims,	as	
				defined in 37 CF	R 1.56.		
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's learning of the country other than the United States of certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of certificate, or 365(a) of any PCT international applications the box and pregion application for patent or inventor's certificate.							
certificate, or 365(a) of any PCT international application which designated at least one doubling office or inventor's certificate, America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.							
Out First Conv. Attached?							
Prior Foreign Application Number(s)	ור	Country	Foreign Filing Date (MM/DD/YYYY)	Not Claimed		0	
PQ0559	Aus	stralia	05/25/1999			ם	
PQ1313	Aus	stralia	06/30/1999			2	
PQ3457		stralia	10/15/1999	1		╡	
PQ3632 Australia 10/25/1999   Li   ki Li							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
A I the make a see Billionson be		J.S.C. 119(e) of an	y United States provision	al application(3)			
Application Numb		J.S.C. 119(e) of an	e (MM/DD/YYYY)			liantion	
Application Numb		J.S.C. 119(e) of an	e (MM/DD/YYYY)	Addit	ional provisional app	plication	
Application Numb		J.S.C. 119(e) of an	y United States provision e (MM/DD/YYYY)	Addit numb	ional provisional app ers are listed on a lemental priority dat	a sheet	
Application Numb		J.S.C. 119(e) of an	y United States provision e (MM/DD/YYYY)	Addit numb	ional provisional app pers are listed on a	a sheet	

[Page 1 of 2]

Burden Hour Statement. This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the Burden Hour Statement. This form is estimated to take 0.4 hours to complete this form should be sent to the Chief Information.

Docket No.: NPX001US

A steplin

Please type a plu	Under the	inside this box -	+ Act of 19	995, no p	F ersons ar	Paten e req	t and Tr uired to		I. OH			30/00. OMB (	MMERCE
DEC		ATION —	- Uti	lity	or D	es	sigr	ı P	ater	nt A	pp	licatio	n
I hereby claim th United States of United States or	e benefit i America, PCT Inter	under 35 U.S.C. 120 o listed below and, inst mational application in rial to patentability as ternational filing date o	of any Unit ofar as the the mann defined in	ted State e subject er provid 37 CFR	s applicati	ion(s)	or 365 th of the	(c) of	any PCT	internati applicat 112, I a en the fil	ional ag ion is i cknowl ling dat	oplication designot disclosed in edge the duty se of the prior	gnating the n the prior to disclose application
		t Application or Number				Par (N	ent Fi MM/DD	ling /YY	Date YY)			nt Patent N if applicab	
Additional	is or PC	T international applica	tion numb	pers are	isted on a	supp	blementa	al prio	rity data s	heet PT	O/SB/0	2B attached h	ereto.
As a named inve	entor. I her	reby appoint the follow nected therewith:	ing registe	ered prac	titioner(s)	to pr	osecute	this a	application	and to	transac	Flace Custo	mer
and trademark	Office Con		OR			ame	registrat	tion n	umber liste	ed belov	, L	Number Bar Label hei	
				Registra Numb	tion	ante	registra	uon n	Name		Registration Number		
	Name												
Additional i	egistered	practitioner(s) named	on supple	mental F	Registered	Prac	titioner_	nform	nation she	et PTO/	SB/0 <u>2</u> C	attached here	eto.
Direct all corr	esponde	nce to: 🔯 Custor or Bar	mer Num Code La		2401	1			OR	Co	rrespo	ondence add	ress below
Name	Kia Si	lverbrook											
Address	Silver	brook Research	Pty Lt	:d									
Address	393 [	Darling Street											
City	Balma	ain		-		5	State	NS	SW_	ZIP	204	1	
Country	ry Australia Telephone 61-2-9818-6633 Fax 61-2-9818-6711												
I hereby declar believed to be punishable by	fine or in	statements made he further that these statement, or both, issued thereon.	rein of my atements under 18	y own kr were ma U.S.C.	nowledge ade with t 1001 and	are ti he kr that	rue and nowledge such w	that e that illful f	all statem t willful fal alse state	ents ma lse state ments r	ade on ements nay jeo	information at and the like s opardize the v	nd belief are so made are alidity of the
Name of S	ole or F	irst Inventor:					A petit	ion h	as been	filed fo	r this	unsigned inv	entor
G	iven Nar	ne (first and middle	[if any])						Family	y Name	or Su	ırname	
	Kia								Silve	rbroo	k		124 40
Inventor's Signature		MSZ										Date	May 16 2000
Residence:	City	Balmain		State	NSW		Country	<u>,  </u>	Austral	ia		Citizenship	Australia
Post Office	Address	393 Darling St	reet										
Post Office	Address												

Docket No. NPX001US

Country

ZIP

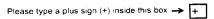
State

Please type a plus sign (+) inside this box → +	PTO/SB/02A (3-97)  Approved for use through 9/30/98. OMB 0651-0032  Patent and Trademot to a collection of information unless it contains a
Under the Paperwork Reduction Act of 1995, no persons	Patent and Trademark Unite, 0.3, 221 Manual Patent Annual Pa
valid OMB control number.	

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1\_ of 1\_ **DECLARATION** A petition has been filed for this unsigned inventor Name of Additional Joint Inventor, if any: Family Name or Surname Given Name (first and middle [if any]) Lapstun Paul May 16, 2000 Date Inventor's Signature Norwegian Australia <u>NS</u>W Citizenship Rodd Point Country Residence: City 13 Duke Avenue Post Office Address Post Office Address Australia NSW 2046 Country ZIP Rodd Point State A petition has been filed for this unsigned inventor Name of Additional Joint Inventor, if any: Family Name or Surname Given Name (first and middle [if any]) inventor's Signature Citizenship State Residence: City Post Office Address Post Office Address Country ZIP State City A petition has been filed for this unsigned inventor Name of Additional Joint Inventor, if any: Family Name or Surname Given Name (first and middle [if any]) Inventor's Date Signature Residence: City State Post Office Address

Post Office Address





PTO/SB/02B (3-97)

Approved for use through 9/30/98. OMB 0651-0032 

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Supplemental Priority Data Sheet

Additional foreign applications:								
Prior Foreign Application Number(s)	Country	For	eign Filing Date	Priority Not Claimed	Certified Copy Attached? YES NO			
PQ4392	Australia	<del>                                     </del>	2/1/1999	000000000000000	000000000000000000000000000000000000000			
Additional provisional applications:								
Applic	cation Number		Filing Date (	MM/DD/YYYY)				
Additional U.S. application	ons:							
U.S. Parent Application PCT Parent Number Number				iling Date D/YYYY)	Parent Patent Number (if applicable)			

Burden Hour Statement. This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer. Patent and Trademark Office.